Fill in this information to identify the case:					
Debtor 1 Brian McCarthy					
Debtor 2 (Spouse, if filing)					
United States Bankruptcy Court for the: MIDDLE	District of: PA (State)				
Case number <u>5:15-bk-01369-RNO</u>	<u> </u>				

Form 4100R

Response to Notice of Final Cure Payment

10/15

Part 1: Mortgage Name of creditor: \underline{C}		c/o Select Portfolio	Servicing, Inc.					Court claim no. (if known)
Leat 4 digite of any	number veu use te	identify the debt	or'o occount:	9	9	8	2	
Last 4 digits of any Property address:	121 Lenape Driv Number Street	•	or's account.					
	Milford City	PA State	18337 ZIP Code					
art 2: Prepetitio	on Default Paymen	ts						
Check one:								
☐ Creditor agrees the creditor's clair	nat the debtor(s) have	e paid in full the a	mount required	to cure th	ne prep	etitior	n defau	ılt
☐ Creditor disagree	s that the debtor(s) h							
Creditor disagrees on the creditor's of of this response i	s that the debtor(s) h claim. Creditor assert	s that the total pre						
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Form 4100R

Brian McCarthy

Part 4:

Itemized Payment History

If the creditor disagrees in Part 2 that the prepetition arrearage has been paid in full or states in Part 3 that the debtor(s) are not current with all postpetition payments, including all fees, charges, expenses, escrow, and costs, the creditor must attach an itemized payment history disclosing the following amounts from the date of the bankruptcy filing through the date of this response:

- all payments received;
- all fees, costs, escrow, and expenses assessed to the mortgage; and
- all amounts the creditor contends remain unpaid.

Part 5:

Sign Here

Check the appropriate box:: ☐ I am the creditor.

☑ I am the creditor's authorized agent.

The person completing this response must sign it. The response must be filed as a supplement to the creditor	r's
proof of claim.	

I declare under penalty of perjury that the information provided in this response is true and correct
to the best of my knowledge, information, and reasonable belief.

Sign and print your name and your title, if any, and state your address and telephone number if different from the notice address listed on the proof of claim to which this response applies.

×	/s/ Danielle Boyl Signature	e-Ebersole, Es	quire	Date	e <u>07/30</u>	//2019	
Print	Danielle Boyle-Ek	persole, Esquir Middle Name	Last Name		Title	Attorney	
Company	Hladik, Onorato &	Federman, LLP		<u>-</u>			
If different from the notice address listed on the proof of claim to which this response applies:							
Address	298 Wissahickon A Number Stree						
	North Wales, PA	19454					
	City		State	ZIP Code			

Form 4100R

Desc

Contact phone (215) 855- 9521

Email debersole@hoflawgroup.com

IN THE UNITED STATES BANKRUPTCY COURT FOR THE MIDDLE DISTRICT OF PENNSYLVANIA

In Re: : Bankruptcy No. 5:15-bk-01369-RNO

Brian McCarthy : Chapter 13

Debtor

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CSMC 2018-RPL7 Trust

c/o Select Portfolio Servicing, Inc.

Movant

VS.

Brian McCarthy :

Debtor/Respondent

and

Charles J DeHart, III, Esquire :

Trustee/Respondent

CERTIFICATE OF SERVICE

I, Danielle Boyle-Ebersole, Esq., hereby certify that I caused to be served true and correct copies of the <u>STATEMENT IN RESPONSE TO NOTICE OF FINAL CURE PAYMENT</u> at the respective last known address of each person set forth below on **07/30/2019**:

Vern S. Lazaroff, Esquire Brian McCarthy

Via ECF 4347 Conashaugh Lakes *Attorney for Debtor* Milford, PA 18337

Via First Class Mail

Charles J DeHart, III, Esquire Debtor

Via ECF *Trustee*

Respectfully Submitted,

Date: 07/30/2019 /s/Danielle Boyle-Ebersole, Esquire

Danielle Boyle-Ebersole, Esquire Hladik, Onorato & Federman, LLP

298 Wissahickon Avenue North Wales, PA 19454 Phone 215-855-9521 Fax 215-855-9121